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# URBAN DISTRICT OF SEDGLEY

(STAFFORDSHIRE)

# ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

AND OF THE

CHIEF PUBLIC HEALTH INSPECTOR

FOR THE YEAR

1961



# URBAN DISTRICT OF SEDGLEY.

(Staffordshire)

ANNUAL REPORTS

of the

Medical Officer of Health

and the

Chief Public Health Inspector.

for the year

1961



# SEDGLEY URBAN DISTRICT COUNCIL

PUBLIC HEALTH COMMITTEE

#### Chairman:

Councillor H. V. Mainwaring

#### Members:

Councillor T. P. Hanley, J.P., C.C., (Chairman of the Council).

Councillor A. W. Bradley

" F. S. Dews

J. P. Fithern

" E. Langford

" B. A. Meredith

W. H. Smith

W. Timmins

" C. A. Turner

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# STATISTICAL SUMMARY 1961.

Area: 3,830 acres.

Population: 28,350

Number of Inhabited Houses: 8,946

Sum represented by a Penny Rate: £1,120

Ratable Value: £275,337

General Rate: 21/6d.

Birth Rate: 18.97 (crude)

17.45 (standardised)

17.4 (England and Wales)

Death Rate; 13.93 (crude)

11.42 (standardised)

12.0 (England and Wales)

Infantile Death Rate, per 1,000 Births: 22.30

England and Wales : 21.4

Deaths from Respiratory Tuberculosis: 3

" from other Tuberculosis Diseases: Nil

Respiratory Tuberculosis Death Rate: 0.106

From other Tuberculosis Diseases Death Rate: Nil

Average Death Rate from Respiratory Tuberculosis for ten previous years: 0.248

Average Death Rate from other forms of Tuberculosis for ten previous years: 0.012

#### PUBLIC HEALTH STAFF

Medical Officer of Health:

F.B. Mackenzie, D.S.O., M.C., M.A., M.B., Ch.B., D.P.H. (Acting)

Chief Public Health Inspector and Cleansing Superintendent:
David J.W. Robertson, Cert. S.I.B., M.A.P.H.I., M.Inst.P.C.
Cert. Meat and Food Inspector.

#### Additional Public Health Inspectors:

- R. B. M. Anderson, A.R.S.H., A.I.P.H.E., M.R.I.P.H.H., M.A.P.H.I. Cert. Meat and Food Inspector.
- J. Millward, Cert.P.H.I.J.B., A.R.S.H., M.A.P.H.I., R.S.H. Diploma for Smoke Inspectors.

  Cert. Meat and Food Inspector.

Clerical Staff:

Mrs. S. A. Bates.

Miss C. M. Edwards.

Official Address and Telephone Number of Medical Officer of Health:"The Limes", Dudley Road, Sedgley.
Private Telephone Number.

Sedgley 3101
Wolverhampton 37320

#### REPORT OF THE MEDICAL OFFICER HEALTH

#### FOR 1961.

To the Chairman and Members of the Sedgley Urban District Council.

Mr. Chairman and Gentlemen,

The requirements of my Annual Report are laid down in Ministry of Health Circular 1/62 and I report accordingly.

There is no hard and fast line between preventive medicine, sanitation, improvements in standards of living and health promotion They are all closeley integrated in an all-embracing public health service and in my report I give information relating to:-

(a) General provision of Health Services.

Vital Statistics.

(b) (c) Prevalence and Control over Infectious and other diseases.

Sanitary Circumstances of the Area.

Housing.

Inspection and supervision of Food and other work which falls within the sphere of your Public Health Inspector in relation to safe-guarding the health of the community.

Such subjects of general public interest as Health Education. Smoking and Cancer, Immunisation, Pure Food, Clean Air and Smoke Abatement, Fluoridation of Water, Prevention of Accidents, Noise Abatement and Care and Housing of Old People I have reported upon from time to time in my monthly reports in the course of the year, to all of which subjects your Health Committee has given close consideration.

During the year the health of the community has been satisfactory. There has been no invalidity attributable to causes or factors related to conditions which could be considered as coming within the province of public health preventive measures, nor has there been any heavy incidence of infectious diséase with the exception of measles when there were 450 cases as against 10 last year.

There were no cases of poliomyelitis or diphtheria.

The population of the urban district as estimated, mid-year 1961, by the Registrar-General is given as 28350, an increase of 920 on last year. The figure of the recent Census is still awaited.

The crude birth rate per 1000 of the estimated population The comparability factor provided by the Registrar-General (0.92) brings this to a rate of 17.45 which is the standardised birth rate for the district for 1961, the rate for England and Wales being 17.4.

The crude death rate per 1000 of estimated population was The comparability factor being 0.82, the crude death rate becomes standardised to a rate of 11.42, the rate for England and Wales being 12.

The number of births exceeded the number of deaths by 143 which can be regarded as natural increase of district population. The number of infant deaths was 12, the same as last year, giving an infantile mortality rate of 22.30 per 1,000 births. The rate for England and Wales was 21.4 per 1,000 live births and was the lowest ever recorded in the country.

Causes of death are shown in relevant table.

Heart diseases, cancer, vascular lesions of the nervous system and respiratory disease continue to be the predominating causes of adult death.

Deaths from Cancer of lungs and bronchus were 8 as against 11 last year, and deaths from Cancer all forms 53 as against 44 in 1960.

There were 3 deaths from pulmonary tuberculosis. In respect of this disease 12 new cases were notified as against 10 last year. Further statistical information is given in the tuberculosis section of the report.

I thank the Housing Committee for the consideration they have given to cases referred to them for rehousing on medical grounds. Applications should not be subjected to rigid time and length of application qualification. Consideration of the urgency of the application is always the procedure to be recommended.

The contribution Mr. Robertson makes to the solution of the problem of letting and rehousing is invaluable.

The Area Welfare Officer, Mr. R. C. Cox, continues to give his valuable assistance in finding institutional accommodation for aged and infirm persons when such is deemed necessary in their interest, welfare and safety.

My thanks are given to your Health Committee for their interest in the health and welfare of the community, to the general practitioners for their co-operation and to all the officials of your Council staff for their assistance.

I have the honour to be,

Your obedient Servant,

F. B. Mackenzie,

Acting Medical Officer of Health.

November, 1962.

#### GENERAL PROVISION OF HEALTH SERVICES IN THE AREA

The Medical Officer of Health holds office in virtue of a joint appointment by the Sedgley Urban District Council, the Tettenhall Urban District Council and the Staffordshire County Council on a time basis of 5/11ths, 2/11ths and 4/11ths respectively.

As Medical Officer of Health of the Urban District his duties are those laid down under the various Public Health Acts and Regulations, in short to inform himself of all matters likely to affect the health of the Urban District and to advise the Council in such matters and to make an Annual Report on the work of the Public Health Department and health of the district.

As Assistant County Medical Officer he undertakes such School Medical Inspections, Minor Ailment School Clinics, Immunisation Sessions and Maternity and Child Welfare Clinics in the Urban District as may be directed by the County Authority.

The Public Health Inspector is a full time appointment by the District Authority. He is a qualified Meat and Food Inspector. Under the general direction of the Medical Officer of Health he performs all the duties imposed on a public health inspector by statute and by any orders, regulations or directions from time to time made or given by the Minister, and by any byelaws or instructions of the local authority applicable to his office.

Public Health and Sanitary matters are brought forward in the Public Health Committee, while Housing and Rehousing matters are dealt with by the Housing Committee. These two Committees meet once monthly.

There are four Health Visitors, three District Murses and three Midwives, all under the direction of the County Council.

In accordance with Part III of the National Health Service Act, the following services are provided by the Local Health Authority, namely the County Council, the organisation and administration being in the hands of the County Medical Officer of Health.

- (a) Health Centres.
- (b) Care of Mothers and Young Children.
- (c) Midwifery.
- (d) Health Visiting.
- (e) Home Nursing.
- (f) Vaccination and Immunisation.
- (g) Ambulance Services.
- (h) Prevention of Illness, care and after care.
- (i) Domestic Help.
- (j) Mental Health Services.

With the exception of provision of Health Centres, all the required services are being provided within the area.

There will probably be some delegation of Part III functions and other powers to the district authority in the near future.

# SCHOOL HEALTH SERVICES

The Medical Inspection of School Children is provided by the County Council who have also established Opthalmic, Dental and Orthopaedic Clinics. The various age groups are examined periodically and from the School Inspections referred to these Clinics or to the General Practitioner if so required.

In cases of Infectious Disease, and if deemed necessary special steps are taken in conjunction with the School Authorities to exclude scholars who have been in contact with such disease. Protective measures and isolation are furthermore under the direction of the Health Department.

The School, Dental, Ear, Nose and Throat, and Eye Clinics provided in the Urban District are given in a separate table together with sessions for Speech Therapy and Physiotherapy.

#### MATERNITY AND CHILD WELFARE

The Staffordshire County Council maintains Ante-Natal and Child Welfare Centres in Sedgley, Upper Gornal and Lower Gornal areas. The Regional Hospital Board provides in addition Ante-Natal Clinics in their own Hospitals and Departments in the Wolverhampton, Dudley and Birmingham areas which are easily accessible to the population of the Urban District.

The Rosemary Ednam Maternity Home which forms part of the Burton Road Hospital, and Wordsley Hospital, are under the administration of the Regional Hospital Board. They provide accommodation for cases referred or booked from the Ante-Natal Clinics or by General Practitioners. Cases wishing to remain at home are delivered by the County Midwives who, if so required can call for the obstetric assistance of a General Practitioner.

The Staffordshire County Council also provides for the care and treatment of deformed, mentally sub-normal and handicapped children. These cases are selected from School Medical Inspections and Child Welfare Clinics or referred by General Practitioners. Illegitimate, Homeless and Neglected Children are provided for in Nurseries, Childrens Homes and Remand Homes of the County.

# NATIONAL ASSISTANCE ACT, 1948 NATIONAL ASSISTANCE (AMENDMENT) ACT, 1951. REMOVAL OF PERSONS IN NEED OF CARE AND ATTENTION

These Acts deal with the care of aged and infirm persons incapable of looking after themselves; and give powers to remove to a suitable hostel or institution if considered necessary. It has not been necessary during the year to exercise such powers.

I make some observations in respect of Section 47 and Compulsory Removal.

It is a Section that Medical Officers of Health are very reluctant to implement in view of the distress that the unfortunate old people show and the protests they make in being removed from a home that they have lived in possibly all their lives.

It is in the care of those requiring more nursing and personal supervision than can be provided in their homes and who, on account of progressive senile mental deterioration and who in many cases have gross insanitary personal habits and for whom acceptance in Part III accommodation is out of the question, that the difficulty arises. They should really be in an hospital bed but the difficulty is finding an hospital bed at once, so tight is the bed-vacancy situation.

The legislation and procedure as laid down in Section 47 of the National Assistance Act with its Compulsory Removal clause is tailor-made to meet the situation up to the critical point of finding a vacant hospital bed quickly enough. There it would appear to fail just when it is needed most. The suit will not fit in the terminal phase of dealing with the case.

All this emphasises the pressing necessity for the provision of more accommodation and of types appropriate for such unfortunate people who may not be suffering from an acute illness or such grave chronic disease as to be eligible for a bed in a general hospital but, nevertheless, should be in hospital; and such cases are likely to become more numerous as time goes on.

The envisaged County '10 year-Plan' should help to ameliorate the bed availability situation.

#### HOSPITALS

Administration of Hospitals and Specialist Services is the responsibility of the Birmingham Regional Hospital Board.

The Hospitals and Specialist departments serving the district and easily accessible, are those of Wolverhampton, Dudley and Birmingham.

Hospital treatment for cases suffering from Infectious Disease and in need of such treatment is provided in Moxley Hospital.

#### TUBERCULOSIS

Institutions are maintained by the Regional Hospital Board for the treatment of persons suffering from Tuberculosis. The visiting of Tuberculosis Patients in relation to their care and after care is under the administration of the County Council. Chest Clinics are situated at Dudley and Wolverhampton and several Sanatoria are available.

#### LABORATORY FACILITIES

Pathological and Bacteriological examinations are made by the Public Health Laboratory Service in Stafford.

#### WELFARE OFFICERS

Area Welfare Officer: Mr. R.C. Cox, 6a Birch Street, Wolverhampton. Child Welfare Officer: Miss White, 153 Tettenhall Road, Wolverhampton. Social Worker: Miss Burd, Old Police Buildings, Dudley.

# CLINICS AND TREATMENT CENTRES

1. THE QUADRANT CLINIC, SEDGLEY.

Ante-Natal Clinic Friday morning weekly.

Child Welfare Clinic Wednesday afternoon weekly.

School Clinic
Wednesday morning fortnightly,

Speech Therapy
Tuesday all day weekly.

Dental Clinic
Saturday morning weekly.

Physiotherapy
Friday afternoon weekly.

Chiropody Service
Monday morning weekly.

2. BLEAK HOUSE CLINIC, UPPER GORNAL.

Child Welfare
Tuesday afternoon weekly.

School Clinic
Tuesday morning fortnightly.

Eye Clinic

Monday afternoon weekly.

(During term time).

E.N.T. Clinic
Periodically.

Chiropody Service
Wednesday morning fortnightly.

3. BULL STREET CLINIC, LOWER GORNAL.

Child Welfare Clinic
Friday afternoon weekly.

School Clinic Friday morning fortnightly.

Ante-Natal Clinic
Friday morning fortnightly.

Physiotherapy Clinic
Tuesday weekly all day.

Chiropody Service
Wednesday morning fortnightly.

#### OLD PEOPLES CLUBS

O.A.P. Club, Sedgley.

O.A.P. Club, Sedgley.

O.A.P. Club, Lower Gornal.

#### Secretary:

Miss Ashton, 62 Ridgeway, Sedgley.

Mrs. S. Dews, 14 Ridgeway, Sedgley.

Mr. E. Cox, 66 Redhall Road, Lower Gornal.

#### DOMESTIC HELP SERVICE

This service is provided through the Area Health Office, Brierley Hill.

60 families were provided with Domestic Help and 4 had the services of Neighbourly Helps.

#### AMBULANCES

The Ambulance Services are operated by the County Council. The movement of all sitting and stretcher cases is controlled by Tipton Station (Birch Street, Tel. No. Tipton 3121-2-3). Radio is fitted in approximately 75% of the vehicles and intercommunication and contact is operated through Tipton. This should contribute to the speeding-up of the service.

The movement of Infectious Disease, with the exception of Smallpox, is also dealt with through Tipton.

# VITAL STATISTICS

	M.	$\mathbf{F}_{ullet}$	TOTAL
LIVE BIRTHS	280	258	538
Legitimate Illegitimate	274 6	252 6 .	526 12
Live Birth Rate per 1,000 population (cru	de)	• • •	18.97
Standardised Birth Rate	• • •	• • •	17.45
Illegitimate live births per cent of tota	l live	births	2.23
Still-births	• • •	• • •	8
Still-birth Rate per 1,000 Live and Still	-births	3	14.65
Total Live and Still-births	• • •	• • •	546
Infant Deaths	• • •	n • •	12
Infant Mortality Rate per 1,000 live birt	hs	• • •	22.30
Legitimate Infant Mortality Rate per 1,00		imate irths	22.81
Illegitimate Infant Mortality Rate per 1,		egitimat births	e Nil
Neo-natal (first four weeks) Mortality Ra		1,000 births	22.30
Early Neo-Natal Mortality Rate (deaths une per thousand live bir		e week)	16.72
Perinatal Mortality Rate (Still-births and under one week combined) per thousand still-births	d death	and	31.13
Maternal Deaths (including abortion)	• • •	• • •	Nil
Maternal Mortality Rate per 1,000 live an	d still	-births	Nil
	M.	F.	TOTAL
Deaths	203	192	395
Death Rate (crude)	• • •	• • •	13.93
Standardised Death Rate	• • •	• • •	11.42
Deaths from Cancer (all ages)	• • •	• • •	53
Deaths from Measles (all ages)	• • •	• • •	Nil
Deaths from Whooping Cough (all ages)	• • •	• • •	Nil
Deaths from Gastritis, Enteritis and Diar	rhoea	• • •	2

# CAUSES OF DEATH DURING THE YEAR 1961.

			M.	F.
1.	Tuberculosis, respiratory	• • •	2	1
2.	Tuberculosis, other	• • •		-
3.	Syphilitic disease	• • •		-
4.	Diphtheria	• • •		-
5.	Whooping Cough	• • •	en4	
6.	Meningococcal infections	• • •		-
7.	Acute poliomyelitis			-
8.	Measles	• • •	-	
9.	Other infective and parasitic diseases	• • •		1
10.	Malignant neoplasm, stomach	• • •	8	1
11.	Malignant neoplasm, lungs, bronchus	• • •	8	***
12.	Malignant neoplasm, breast	• • •	-	5
13.	Malignant neoplasm, uterus	• • •	-	2
14.	Other malignant and lymphatic neoplams	• • •	15	14
15.	Leukaemia, aleukaemia	• • •	-	***
16.	Diabetes	• • •	2	4
17.	Vascular lesions of nervous system	• • •	20	24
18.	Coronary disease, angina	• • •	50	38
19.	Hypertension with heart disease		7	5
20.	Other heart diseases	• • •	17	32
21.	Other circulatory diseases	• • •	12	13
22.	Influenza	• • •	3	8
23.	Pneumonia	• • •	6	11
24.	Bronchitis	• • •	23	9
25.	Other diseases of respiratory system	• • •	2	
26.	Ulcer of stomach and duodenum	• • •	2	1
27.	Gastritis, enteritis and diarrhoea	• • •	1	1
28.	Nephritis and nephrosis	• • •		1
29.	Hyperplasia of prostate	• • •	-	_
30.	Pregnancy, childbirth, abortion	• • •		***
31.	Congenital malformations	• • •	3	1
32.	Other defined and ill-defined diseases	• • •	17	11
33.	Motor vehicle accidents	• • •	3	1
34.	All other accidents	• • •	-	8
35.	Suicide	• • •	2	
36.	Homicide and operations of war	• • •		
			203	192

# BIRTH RATES

	Mercal contraction was as a second of the se	SEDGLE		England
YEAR	Number of	BIRT	& Wales Birth	
	Births	Crude	Standardised	Rate
1952	329	14.11		15.3
1953	312	13.18		15.5
1954	304	12.74		15.2
1955	293	12.34		15.0
1956	345	14.29	13.58	15.7
1957	385	15.62	15.15	16.1
1958	352	13.89	13.47	16.4
1959	394	15.00	13.95	16.5
1960	474	17.28	16.07	17.1
1961	538	18.97	17.45	17.4

# DEATH RATES

		SEDGLE:	Y	England
YEAR	Number	DI	EATH RATE	& Wales Death
	of Deaths	Crude	Standardised	Rate
5 5 3				
1952	260	11.15		11.3
1953	677	28.6		11.4
1954	742	31.09	guine gains guine	11.3
1955	726	30.58		11.7
1956	642	26.60	10.90	11.7
1957	592	24.01	11.28	11.5
1958	458	18.08	10.48	11.7
1959	370	14.08	10.71	11.6
1960	392	14.29	11.00	11.5
1961	395	13.93	11.42	12.0

# INFANTILE MORTALITY 1961

Nett deaths from causes stated at various ages under one year of age.

CAUSES OF DEATH	Under 1 week	l - 2 weeks	2 - 3 woeks	3 - 4 Weeks	TOTAL under 1 month.	1 - 3 months	3 - 6 months	6 - 9 months	9 - 12 months	TOTAL DEATHS under 1 year.
Hydrops foetalis	2		-		2		<b></b> -	p.40)	queldi	2
Congenital Atelectasis	4			-	4		-			4
Collapse of lungs	1	-	-		1		-			1
Pulmonary haemorrhage	1				1					1
Subarachnoid haemorrhage	1	-	-	-	1					1
Congenital Heart Disease	-	1	-	-	1		-	-		1
Haemorrhage - Supra Renal Cyst			l		1	_				1
Hyper-plastic Renal dysphasia	Market Parket Andrews	_	1	-	1					1
	9	1	2		12	-		9440	guide	12

The majority of deaths were due to congenital abnormalities.

Of the 9 deaths under one week, 2 died under one hour, and 7 under one day.

# INFANTILE MORTALITY RATES

. <sup>10</sup> − 10 e niker. Prusel ba <b>g</b> enska poetfolik kiel		SEDGLEY	, bit for \$1950 to 3 to 3 to consider the law programme of the state of the supply single the	England
YEAR	Births	Deaths	Rate per 1,000 births	& Wales Rate per 1,000 births
1952	329	9	27.35	27.6
1953	312	6	19.23	26.8
1954	304	13	42.76	25.5
1955	293	13	44.37	24.9
1956	345	10	28.98	23.8
1957	385	18	46.75	23.0
1958	352	12	34.09	22.5
1959	394	7	17.77	22.0
1960	474	12	25.3	21.7
1961	538	12	22.30	21.4
The second process of	  - 	id. s		E

#### OPHTHALMIA NEONATORUM

No case of this disease was notified in the Sedgley Urban District during the year, nor have any cases been recorded in the urban district for many years, a situation that reflects on the efficiency of the midwives.

# PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER

#### DISEASES

The total number of notified cases of infectious disease was 461 as against 42 last year, exclusive of Tuberculosis.

#### Scarlet Fever

7 cases, same as last year.

#### Whooping Cough

1 case, as against 21 last year.

#### Measles

449 cases, as against 8 last year.

#### Peurperal Pyrexia

3 cases, same as last year.

#### Erysipelas

1 case, same as last year.

#### Dysentery

No cases were notified.

#### Remarks on Infectious Disease

The large increase this year in the number of notified cases of infectious diseases is accounted for by the heavy incidence of measles which disease has conformed to its customary marked biennial incidence. Four cases of measles were admitted to hospital, and one case of scarlet fever, a disease which appears to be of a mild nature in these days.

There were no cases of poliomyelitis or diphtheria and only one case of whooping cough. All those diseases are the ones against which immunisation is urged and against which facilities and sessions for immunisation have been available throughout the year. Further statistical information of vaccination and immunisation are given in succeeding pages.

ll new cases of pulmonary tuberculosis were notified during the year. Notifications in the country as a whole show little or no diminution and may be partially due to the contribution mass-radiography makes to detecting asymptomatic cases. There were 3 deaths.

Influenza was prevalent in the early part of the year. It would appear to have made its first appearance in the week before Christmas 1960 and to have increased steadily during the first three weeks of January and to have expended its main force during February.

As to the severity of the disease, it was in the majority of cases mild in the younger years, two to five days duration, and severe in the middle-aged adult workers in many cases. In old people suffering from chronic bronchitis and heart trouble, the affection was often the terminal cause of death.

#### CASES ADMITTED TO HOSPITAL

The total number of cases admitted to Hospital for Infectious Diseases were as follows:-

#### MOXLEY HOSPITAL

Abortion		• • •	2
Tonsilitis	• • •	• • •	1
Gastro-Enteritis .	• • •	• • •	2
Salmonella Infection	• • •	• • •	2
Measles	• • •	• • •	1
Broncho-pneumonia	• • • •	• • •	1
Scarlet Fever	• • •	• • •	i

#### PRESTWOOD SANATORIUM

Tuberculosis ... 9

#### THE LIMES, SANATORIUM

Pulmonary Tuberculosis ... 1

# SWABS AND SPECIMENS submitted to the Public Health Laboratory:-

Sputa Swa	bs	• • •			51
Cultures :	for	Myco-Tu	ibercu]	osis	58
Faeces	• • •		• • •		31

The greater majority of the sputa swabs were submitted by the Tuberculosis Officer.

#### GENERAL MEASURES

School Notifications of Infectious Disease are received by the Health Department and carefully studied for any features necessitating prompt action.

When desirable the schools are disinfected and terminal disinfection of premises and articles in affected households which have been exposed to infection carried out in all cases.

#### DISINFECTION OF CONTAMINATED CLOTHING AND BEDDING

An arrangement exists with the Public Health Department, Dudley, for the disinfection of contaminated clothing and bedding if the need should arise.

#### VACCINATION AND IMMUNISATION

The County Council does not provide for a Vaccination Centre in Sedgley, but arrangements can be made with the Medical Practitioners by those who wish themselves or their children vaccinated against Small-Pox. Provision of such a centre is now under consideration.

Immunisation against Diphtheria, Whooping Cough, and Poliomyelitis are undertaken in the Child Welfare and Schools Clinics, while special Immunisation Sessions in Schools provide for an increase in the immunity of the child population. The administration of Poliomyelitis Vaccination is in the hands of the Area Health Office at Brierley Hill.

With the advent of Poliomyelitis vaccine, and being in good supply, immunisation sessions have been held in all the schools in the area and at the Clinics in the course of the year.

Private Medical Practitioners are also prepared to vaccinate on request.

### SMALL-POX

Cases of suspected Small-pox are notified to the Small-pox Consultant in cases of doubt, who then takes further charge of the disposal of the case. Local protective and preventive measures are under the direction of the Health Department.

The following information has been supplied by the Brierley Hill Area Health Office:-

#### Small-pox

Vaccinations performed during 1961:-

		our borrormed	dariting 1301:-	-			
	Number vac	••• 5	nder 1 year to 4 years to 14 years ver 15 years	• • •	82 20 4 11	(1	6) 5) 2) 3)
			Total	•	117	(21	6)
	Number re-	vaccinated 5 Ov	to 14 years er 15 years	• • •	1		0)
			Total	•	12	( )	3)
<u>Diph</u> t	<u>theria</u> – Im	munisation					
	Total numb	er of childre y immunisatio	n who have re n during 1961	ceived	1 411	(377	7)
	Number who tion d	have had a r uring 1961	e-inforcing i	njec-	559	(572	<u> </u>
Whoop	oing Cough						
	Number of year e	children immu nded 31st Dec	mised during ember 1961.	the			
	Under 5 year	ars of age	•••	• •	318	(405	)
	From 5 to	14 years	•••	• •	15	(2	:)

(Figures in brackets relate to 1960).

Total

(407)

333

#### Poliomyelitis - Immunisation

The information given here is in respect of the whole area covered by the Brierley Hill Area Health Committee. Figures for separate constituent authorities in the area are not available.

Approximately 83% of the children between the ages of six months and fifteen years had completed initial vaccination at 31st December, 1961.

Of those who had received the initial two injections, approximately 86% had also received a third or reinforcing injection.

#### Evening Sessions

Open evening sessions for all ages up to 40 and expectant mothers were arranged for at suitable intervals in the course of the year at the various Clinics.

Total attendances - 2033

#### Remarks

In respect of immunisation against poliomyelitis, diphtheria, whooping cough, tetanus and vaccination against smallpox, the Minister of Health had occasion to make the following observations recently to the Royal Society of Health.

"I want to say to whom it may concern that the level of immunity today in this country still leaves much to be desired, and that the time has come, indeed is overdue, for the deficiencies to be made good. Whenever there was a local outbreak of one of these diseases, reports and pictures in the papers were seen of queues of people forming up in a panic to get themselves or their children protected. These queues were the evidence of responsibilities neglected by parents".

"A crash programme of immunisation against any one disease was not what was needed. What was needed was a comprehensive and planned programme of immunisation and vaccination against those diseases at the appropriate age".

Waiting until there is an outbreak of any one particular disease and then demanding immediate vaccination is the wrong attitude. (Personal observation).

AGE - GROUPS and LOCALITY - DISTRIBUTION of INFECTIOUS DISEASES

# (Excluding Tuberculosis) Notified in 1961

	Erysipelas	Peurperal Pyrexia	Measles	Whooping Cough	Scarlet Fever	DISEASE	the control and the control of the stage of
461	ļ-d	W	1,449	<b>}</b>	7	Total all ages	To an agree the street of the
251	Н		246	Н	W	M	
210	1	W	203		+	H	
13	l	l	13	l		Under one year.	elicitation of the last the happy designed the
37	ı	ı	37	ı	ı	F I	ete s plate en en deschey e a vita distribute
52	1	enskasternam ud	52	ngan, addin njuhusu ve 💮 ga		N !	and the report of the second state of
45	l	1	45	;1	1	l I	and a second control of the second
69	1	l	68	l	<b>Н</b>	1	
227	1	ı	220	H	9	965	
11	1	ı	H	l	t	10 to 14	
+	1	N	N	l	l	24 24 25	
N		H	I	l	l	25 to 444	
	l	l	l	l	1	64	
<del>   -</del>	H	The second second	1	1	and will proper to the same of	65 and over	
175		W	166	ı	0	Sedgle	<i>y</i>
36	l	l	36	1	Į.	Upper Gornal	
183	<u></u>	1	181	l		Lower Gornal	,
67		1	66	⊬	i	Goldthor Park	cn

#### TUBERCULOSIS

The number of new cases notified for the year was 11 pulmonary and 1 non-pulmonary as against 10 pulmonary in 1960.

		NEW (	CASES			DEA	THS	angara di directa de la companya de
AGE	P	ul	Non-	Pul	Respi	ratory	Other	
PERIODS	M	F	M	$\mathbf{F}$	M	F	M	F
Under 1 year  1 to 2 years  2 to 4 years  5 to 9 years  10 to 14 years	_ _ _ 1		-		-	drong  and  and  and  and  and	-	
15 to 19 years			-	-	_	-	-	15 d of 15 d o
20 to 24 years 25 to 34 years	1	1	-	-	_	-		
35 to 44 years	1	_	_	1	_	-	_	_
45 to 54 years	3	-	-		1		_	
55 to 64 years	2	1			-	garda.		
65 years and over	1	-		-	1	1		1. (1. (1. (1. (1. (1. (1. (1. (1. (1. (
	9	2		1	2	1		

#### YEARLY FIGURES FOR THE LAST DECADE

	NEW C	ASES	DEATHS				
	Pulmonary	Non- Pulmonary	Pulmonary	Non- Pulmonary			
1050	7.6	7	7.7				
1952	16	3	11	-			
1953	26	1	5	2			
1954	13	1	7	-			
1955	18	_	3	-			
1956	17		5	-			
1957	9	1	2	1			
1958	10		3	-			
1959	17	,	1				
1960	10		3	-			
1961	11	1	3	-			

Deaths are in relation to the total number of notified cases on the register.

# TUBERCULOSIS REGISTER

Number on register 31st December 196	0 173
New cases Inward transfers from other	12
districts	8
	20 20
	193
Less cases removed from register	24
Number on Register 31st December, 19	61 169
	Public Statement of the control of t

# Inward Transfers from other districts

Cradley Heath 1	
Birmingham 1	
Netherton 1	
Kent 2	
8	

# MASS RADIOGRAPHY SERVICE

I am indebted to Dr. R. Janet Posner, Medical Director of The Dudley Mobile Mass Radiography Unit for the following report.

"ANALYSIS OF SURVEY CARRIED OUT IN SEDGLEY AND DISTRICT FROM 29th AUGUST TO 22nd SEPTEMBER, 1961.

# UNIT LOCATIONS:

BILSTON STREET CAR PARK, SEDGLEY
CLIFFORD WILLIAMS, LTD., LOWER GORNAL
ALFRED ALLEN, LTD., LOWER GORNAL
THE GREEN DRAGON, UPPER GORNAL
THE COTTAGE OF CONTENT, UPPER GORNAL
GUADRANT CLINIC, SEDGLEY
ELLOWES, STICKLEY ESTATE, LOWER GORNAL
BULL STREET CLINIC, GORNAL WOOD
MEMORIAL HALL, LOWER GORNAL
STRAITS HOUSE, LOWER GORNAL
SEVEN STARS, SEDGLEY

A total of 1,332 people were X-rayed in the following groups:-

			Male	<u>Female</u>	Total
Public	• • •	• • •	468	540	1,008
Clifford Williams, Ltd.	• • •	• • •	4	139	143
Alfred Allen, Ltd	• • •	• • •	141	11	152
Other Groups	• • •	• • •	14	15	29
			627	705	1,332

#### MEDICAL ANALYSIS:

Three people were referred through their own General Practitioners to the Chest Clinic for further investigation, as possibly inactive tuberculosis.

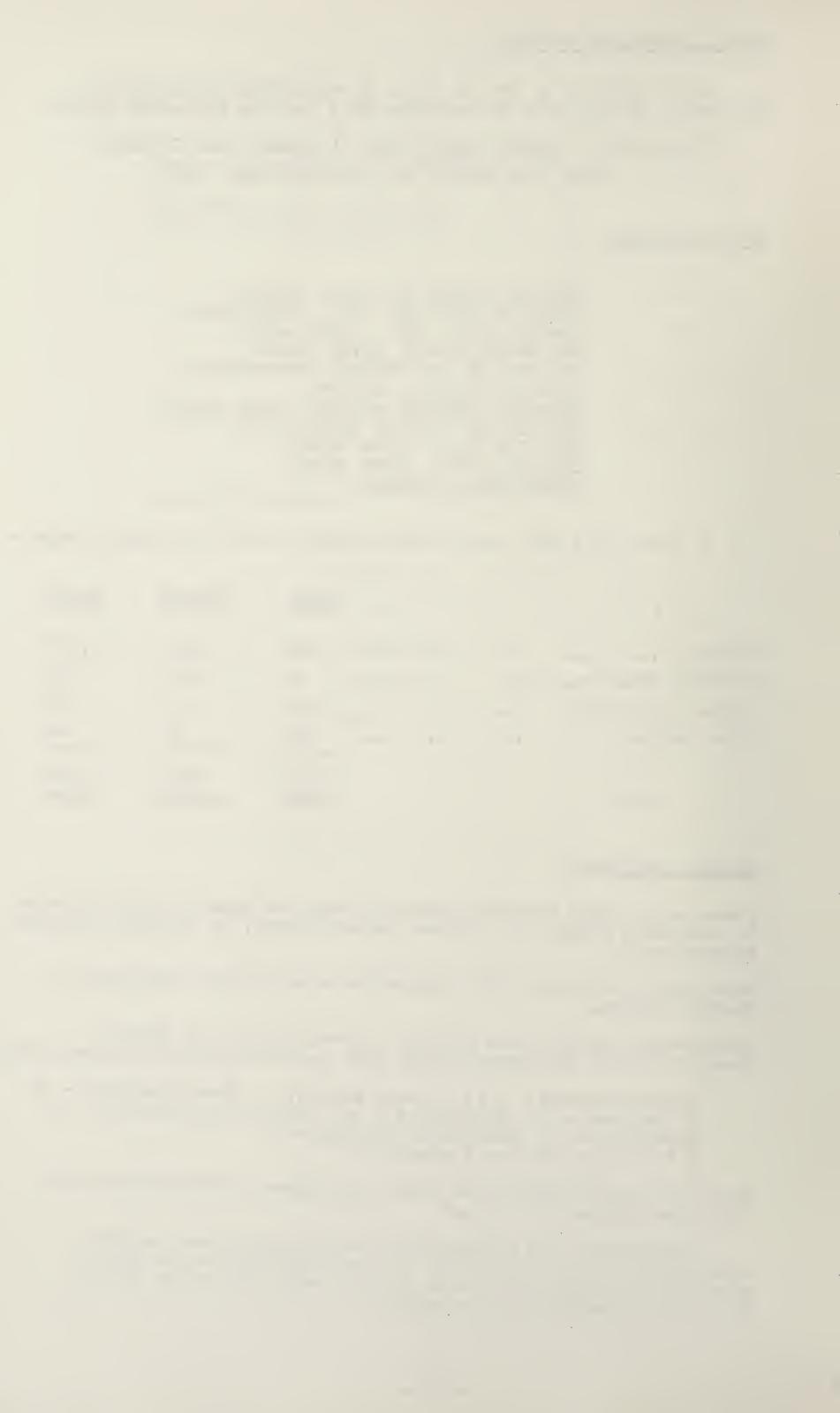
Three people with inactive tuberculosis were noted requiring no further action.

Twenty-three people were referred through their own General Practitioner to the Chest Clinic with non-tuberculosis abnormalities.

Pneumoconioses - 8 (l already known); ? Bronchiectasis - 1; ? Neoplasm - 1; Bronchitis - 1; Cardiac abnormality - 1; Pneumonia - 1; Increased markings - 2. 8 for investigation ? cause.

Six people were referred to their own General Practitioners for any other necessary action."

Personally I am disappointed at the number who availed themselves of the opportunity to have their chests X-rayed in view of the efforts that were made to bring the visit of the Units to the notice of the public.



# SANITARY CIRCUMSTANCES OF THE AREA

# Sanitary Circumstances

The Chief Public Health Inspector and his assistant inspectors, in their allowed fields, have given their closest supervision and attention to the sanitary conditions prevailing in the district, With the exception of the insanitary condition of the caravan site on the Jockey Field the district can be considered as satisfactory.

Implementation of legislation in respect of Hygiene Regulations has figured very much in the activities of your inspectors. They have a vital part to play in the oversight of personnel engaged in food handling and in the structure and condition of premises and food transport vehicles.

The use they make of the Public Health Laboratory in submitting material and specimens for bacteriological examination or for report of the analyst, is to be commended.

It is satisfactory to report that there have been no cases of food poisoning notified.

Details of your Chief Inspector's work is given in his section of the report.

#### Water Supply

The Sedgley Urban District, with the exception of the Goldthorn Park area, is supplied by the South Staffordshire Water Works Company. The Goldthorn Park area receives the supply from the Wolverhampton Corporation Water Undertaking.

I am indebted to Mr. R. H. Taylor, B.Sc., M.I.C.E. and Mr. W. C. Johnson, M.I.C.E., M.I.Mech.E. M.I.W.E. the respective Engineers-in-Chief of the undermentioned undertakings, for the following information.

- (a) South Staffordshire Waterworks Company
- (i) The water supply of the area has been satisfactory both in quality and quantity.

Sedgley district is supplied with water from service reservoirs at Dudley, the supply to which can be maintained from four-pumping stations in the Smestow Valley and two pumping stations near Lichfield.

(ii) The greater part of the water supplied to Sedgley comes from two of the Smestow Valley Stations. Chlorination is practised at both Stations but owing to practical difficulties, samples of the raw water are not obtainable.

During 1961, 36 samples were taken from the Sedgley elevated storage tanks, 16 samples were taken from the Reservoir and 16 were taken from the Waterman's house at Sedgley. Of these 68 samples, 61 were free from all types of coliform bacteria.

The average chemical results for 1961 of the 16 samples from the Waterman's house in Sedgley were:-

На	7.1			
Alkalinity (CaCO <sub>z</sub> )	82	parts	per	million
Chlorides (Cl)	38.5	T t	11	11
Ammoniacal Nitrogen (N)	Trace	e tt	11	11
Albuminoid Nitrogen (N)	Trace	; 11	11	f f
Oxidised Nitrogen (N)	3.3	11	8.8	11
Oxygen absorbed (3 hr at 20°C)	.12	11	11	11
Temporary Hardness	76	11	tt	11

Permanent Hardness	70	Parts	per	million
Total Hardness	146	11	11	11
Iron (Fe)	.04	11	11	ff
Manganese (Mn)	Nil	11	11	11
Zinc (Zn)	Nil	11	11	7 f
Poisonous Metals (Cu & Pb)	Nil	11	11	17
Free Cl	Nil	17	11	11

- (iii) The waters are not liable to plumbo-solvency and the 16 samples from the Waterman's house were all free from any detectable quantities of lead.
- (iv) Chlorination is practised at most of the pumping stations as a precautionary measure. In cases of possible contamination in the event of burst or damaged mains, emptying reservoirs, etc. emergency chlorination is performed. Special apparatus and staff are available for this work. New mains etc. are not brought into use until the water has been examined and pronounced satisfactory.
- (v) The following are particulars of the number of houses supplied and the approximate population:-

	Houses	Estimated Population
(a) Houses supplied direct	7,564	25,263
(b) Houses supplied by outside taps at 31st		
December, 1961.	397	1,325
Total:-	7,961	26,588

Population estimated i.e. 3.34 persons per house.

#### (b) Wolverhampton Corporation Water Undertaking

The water supplied by the Wolverhampton Corporation Water Undertaking to the Goldthorn Park area is derived from a number of sources.

- (i) The water supply has been satisfactory in quantity and quality.
- (ii) The water supplied is not liable to have plumbo-solvent action.
- (iii) There has been no known contamination of the water supply subsequent to leaving the works.

#### Summary of Bacteriological Examinations

T	Coli-aerogenes Organisms per ml.							
Number of Samples	0	1 - 2	3 - 10	Over 10				
1012	980	15	7	10				
Percentage	96.8	1.5	0.7	1.0				

The number of dwelling houses in the Goldthorn Park area supplied direct is 1,069 and the population thereof estimated at 3,742. None are supplied by standpipe.

#### SEWERAGE AND SEWAGE DISPOSAL

I am indebted to your Surveyor, Mr. W.M. Jones, B.Sc. (Eng.), A.M.I.C.E. for the following report:-

#### Sewerage

During the year, the policy of the Public Works Committee of extending the foul sewerage system so as to abolish cesspools, was maintained. A sewer was laid through gardens of 8 houses in Sandyfields Road and the drainage disconnected from the cesspools.

During the year, the foul sewer from the Cotwallend - Catholic Lane area to The Straits was completed, and the drains of the houses concerned have been disconnected from the cesspools.

With the rapid development taking place in The Straits area, some trouble is being experienced with the main sewer, which passes under Bobs Brook Straits Road by way of an inverted syphon. On occasions this 7" diam. syphon has been surcharged and sewage has flowed through the overflow to discharge in the carriageway. As a temporary measure it is proposed early in 1962 to connect the overflow to a pumping station recently constructed on a nearby private estate.

Eventually it will probably be necessary to duplicate the syphon.

#### Sewage Disposal

The Extension Scheme for Lower Gornal Sewage Disposal Works was put under Contract during the year and the Contractors, Messrs. George Law Ltd. have made very satisfactory progress.

Four new bacteria beds have been completed and will be in operation early in 1962 and the construction of the reinforced concrete sedimentation and humus tanks are about to be commenced.

During the year, the Consulting Engineer, Sir A.H.S. Waters and Partners produced their preliminary scheme for the modernisation and enlargement of the Gospel End Sewage Disposal Works. This was submitted to the Ministry and a Local Inquiry will probably be held during 1962.

Pending the construction of the new Works, it is proposed early in 1962 to construct a large lagoon to which sludge can be pumped for storage and digestion. This will enable the sedimentation tanks to be emptied of sludge much more frequently and should considerably improve the quality of the effluent.

# Public Conveniences

No new construction was carried out during the year but all public conveniences suffered wilful damage.

# MUNICIPAL CEMETERY AND CREMATORIUM - GORNAL WOOD

(Sedgley, Dudley and Brierley Hill).

Mr. H. L. Rouse, Cemetery Superintendent, has supplied me with the following information.

#### BURIALS

From July 1954 - 31st December 1961 ... 691 plus 71 stillborn burials.

From 1st January 1961 - 31st December 1961... 156 plus 23 stillborn burials.

#### CREMATIONS

From	Octob	er 1960	) —	31st	Dece	mber	1961	• • •	• • •	• • •	655
From	lst J	anuary	196	51 -	31st	Decen	nber,	1961		• • •	544

#### MORTUARY

The number admitted during the year was 29 as against 27 in 1960.

At date of this report, the New Mortuary, after unforseen constructional delay, is now available for admissions and post-mortems.

#### HOUSING

Your Public Health Inspector reports fully on all aspects of this subject in his report.

I am in agreement with his views and I strongly support his plea for the suitable accommodation of old people and the provision of more single bedroom flats or bungalows when further housing estates are being planned.

I make some observations on the Housing of Old people.

Accommodation should be appropriate to age and physical incapacity or handicap if any. Everything should be provided so that they can help themselves as much as possible. Consideration should be given to the width of doors and avoidance of steps in relation to the use of wheelchairs, nor should gradients be overlooked.

The bed position should be such so that they can see outside when they are confined to bed. They should have their own front door and not access by the corridor system which is rendered noisy by delivering tradesmen and subject to echoing from the hard concrete passageway.

The usual type of bath is dangerous and unsuitable and old people are likely to find themselves in difficulty in getting in and out. Shower baths, may be preferable or a low type of bath with a seat provided in it.

Gardens could be dispensed with. Old people cannot manage them. A small plot is all that is necessary.

Old people must be kept warm. Central heating is therefore the ideal system and also obviates the danger of open and unguarded fires.

There should be a Warden for the group and a calling-up device provided in each house so that occupants can call on the Warden in an emergency. In lieu of the Warden system one of the more able-bodied tenants might have a telephone installed by which emergency calls could be made. Of course, the Warden system is preferable as it provides a much wider service than just emergency calls.

I am indebted to your Surveyor for the following information:-

# 1. Houses completed 1/1/61 - 31/12/61

Municipal dwellings (houses and flats)
Private Houses

78 409

# 2. Estates Completed or Nearing Completion

#### (a) Private

Eaton Manor (Brick Kiln Lane), Brownswall Farm, Sedgley, Coton Road, (Goldthorn Park), Mount Lane, Lower Gornal, and Hopyard Close, Lower Gornal.

#### (b) Municipal

Cricket Meadow, Upper Gornal, Kent Street Shops and Maisonettes Phase 1, Upper Gornal, Ruiton Farm Site, Lower Gornal.

# 3. Private Houses under Construction

The number of private houses under construction at 31/12/61 was 354.

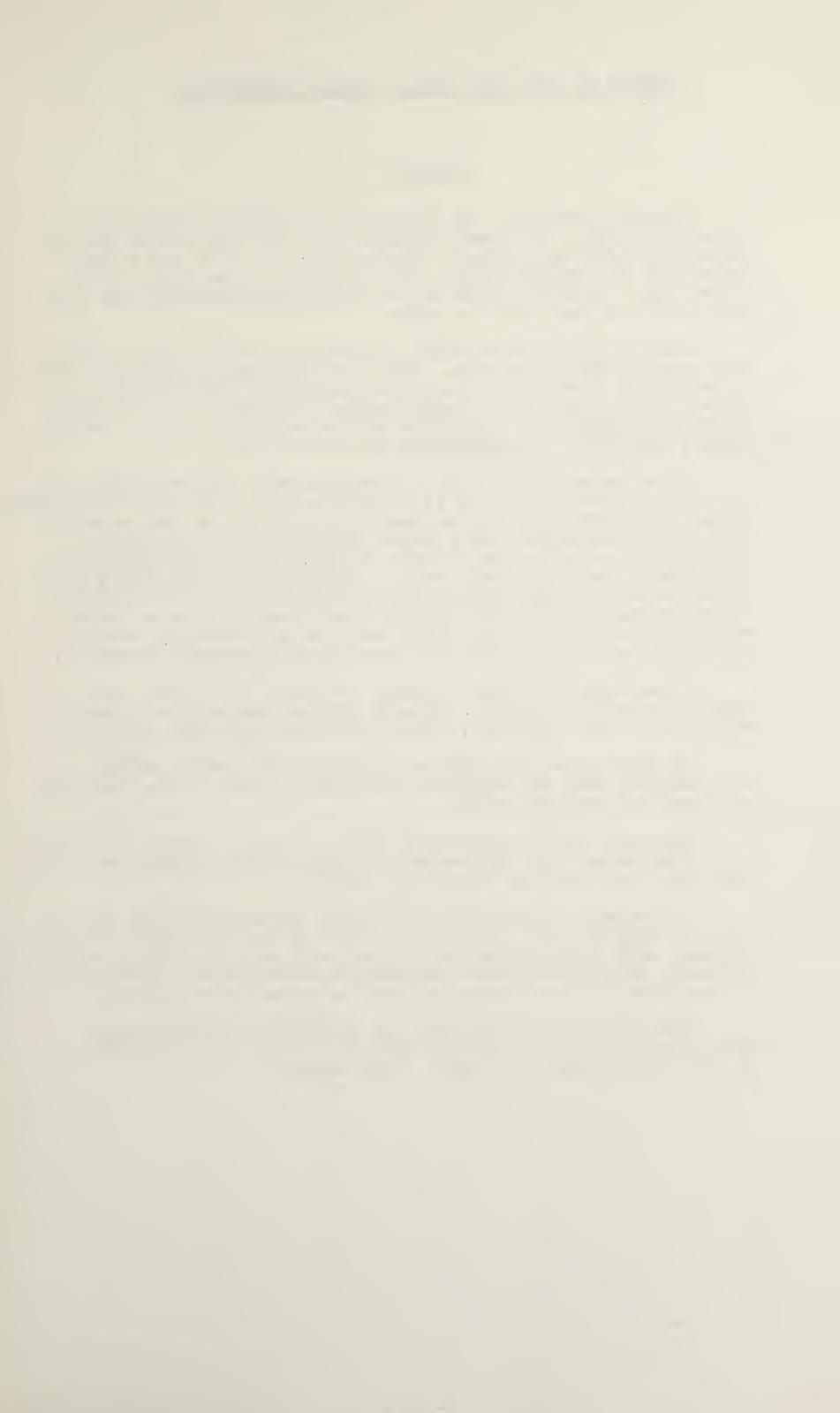
#### Letting of Council Houses

In respect of letting of Council houses, entitlement or consideration of applications is based in the majority of cases on length of time on the waiting list. This on the whole is fair and equitable but from time to time certain cases are brought to my notice of living under conditions detrimental to health and for which, if length of time on the waiting list is the main consideration, there is little hope of obtaining housing conditions that would ameliorate existing ill-health.

Apart from families with tuberculosis histories to which I am glad to say your Housing Committee gives priority, the cases I would draw attention to are bad cases of overcrowding, severe cases of chronic bronchitis and rheumatism and heart affections who are living in old property types of houses very adverse to the conditions of ill-health from which they are suffering.

I would therefore ask that more consideration be given to such cases, waiving the qualification of length of time on the waiting list if medical opinion and recommendation is given and made. Such medical recommendation of course would only be given in most urgent cases.

I appreciate that the shortage of available accommodation to meet the demand for rehousing is the crux of the situation; and I also appreciate the intensive effort your Housing Committee is making to meet the rehousing of those in urgent need and that with this in view, an accommodation survey of Council houses is now being carried out.



#### REPORT OF THE CHIEF PUBLIC HEALTH INSPECTOR.

#### HOUSING

Speaking broadly, the standard of housing in Sedgley is reasonably good. In round figures, out of 8,500 houses in the district, 3,500 are Council houses, another 3,500 are modern houses of the owner/occupier type, leaving a bare 1,500 of an older type. Many of these are in very good condition and none can really be described as slums.

After 17 years work since the end of the War period, all the worst houses have gone. Here and there bad houses are still to be found, houses on which action has been deferred for one reason or another. The occupiers may be elderly and reluctant to move elsewhere, or the house may be within a group of better houses which we are planning to deal with later.

Nevertheless, our work of urban renewal, the replacing of our older houses with new, is continuing and will be a never-ending task. Nowadays it is not so much dilapidation as obsolescence that is the problem. The younger members of the population especially are no longer content to live in the terraced house, two rooms up and two down, with a common yard containing wash-house and W.C., front door opening directly onto the footpath, no bathroom, no hot water supply, sometimes no internal water supply at all. Such houses may still be structurally sound, but they are obsolete and will have to go as soon as possible.

Concerning our actual housing progress during the year 1961 below will be found a summary of the quarterly statements submitted to the Ministry, which gives the total for the year.

In this table, the number of houses demolished refers to premises, many of which had been dealt with and the families rehoused in previous years.

Compared with the previous year, a greater number of houses were demolished, but the number of families and persons rehoused was less than half the figure for 1960.

The process of replacing our older houses with new ones is often a lengthy one. There is often a period of several years between initiating action on old property and the final demolition of same. Statistics for a particular calendar year, therefore, do not give a clear picture of what is actually happening.

The two tables later show our progress in this respect since 1945. These tables are kept up to date and are submitted to the Health Committee every three months.

### A. HOUSES DEMOLISHED

### In Clearance Areas

	Houses Demolished	Displaced Persons	during year Families
Houses unfit for human habitation	59	32	12
Houses on land acquired under sec.43(2) Housing Act, 1957	9	<u>ş</u> †	2
Not in Clearance Areas			
As a result of formal or informal procedure under sec. 17(1) Housing Act, 1957	34	47	17
B. <u>UNFIT HOUSES CLOSED</u>			
Under various sections of the Housing Act, 1957	10	35	10
TOTALS	112	118	41

## SLUM CLEARANCE - PROGRESS STATEMENT

# PART A - INDIVIDUAL ACTION 1. CATEGORIES OF PROPERTIES INVOLVED

(9)		(8)	(7)	(6)		(5)	(4)	(3)	(2)	(1)	
Total families rehoused by Council from houses included in (3) above - (a) before 2/11/55 (b) after 2/11/55		Total houses included in (3) above which are still occupied.	Total houses included in (3) above which are still vacant and waiting demolition.	Total houses included in (3) above which have been demolished.	11 DISPOSAL OF PROPERTIES UNDER  DEMOLITION ORDERS	Total number of Orders, etc. made and included in (1) above dealt with between 2nd November, 1955 and 31st December, 1961.	Total number of Orders, etc. made and included in (1) above dealt with between 1945 and 2nd November, 1955,	Total Demolition Orders made and included in (1) above -	Proportion of above included in Closing Orders:- Undertakings not to use for habitation; and Undertakings to make fit.	Individual Demolition Orders, Closing Orders made and Undertakings of all kinds accepted since 1945.	
115			6	231		175	168	259	48		
237	259	22	237			343		343		343	Grand Total

PART B - CLEARANCE OR OTHER GROUP ACTION

		TOTAL	28	18	38	30	9†1	17	2	27	28	255
	OGRESS	Rehoused privately, awaiting private rehousing, or not rehoused by Council for other reasons.	7	Nil	M	Nil	9	_	Nil		Lin	22
	REHOUSING PROGRESS	Awaiting Rehousing by Council	Nil	LíN.	LiN	LiN	П	W	N	Nil	61	25
	R	by Council After 2/11/55.	13	0 円	35	30	39		N	25	On	189
		Rehoused before 2/11/55		∞	Nil	Nil	LiN	Lin	Nil	Lin	Lin	19
		TOTAL	28	18	38	30	9†7	17	23	27	28	255
ارد والدارة و مرواه الأمارة الم	RESS	Still occu- pied	Z ; N	Nil	Н	LiN		N	N	Nil	0	26
	CLEALANCE PROGRESS	Vacant & Ewaiting Cemolition	Z; N	2	M	T T N	Lin	0	2	LiN	0	25
	CLE	Demolished	28	97	34	30	45	Ŋ	о П	27	LiN	204
•		HOUSES INCLUDED IN	Monument Lane & Cricket Meadow C.P.O.'s	Hermit Street	Kent Street 1 and 2	Holloway St. 1 and 2	Club Row	Kent St. 3,4 and 5	Ox Street, Stone St.	Pale Street	Windmill Street	

During the year, the Health Committee considered the condition of 51 individual houses, reported as unfit for habitation. In 29 cases Demolition Orders were made, in 13 cases Closing Orders, 2 Undertakings to make fit were accepted, and it was decided to demolish the other 7 houses as they belonged to the Local Authority.

Closing Orders, previously made on 3 houses, were revoked as the houses had been renovated and made fit.

Five further Clearance Areas were made during the year at Spills Meadow, Inhedge Street, Summer Lane, Ruiton Street and East Street. In all, about 120 houses are involved, and at the end of the year we were awaiting confirmation by the Minister.

### IMPROVEMENT GRANTS

The giving of grants to enable owners to improve their older property, a very attractive scheme one would think, is still receiving very little support. The introduction of Standard Grants, made to simplify and popularise the idea, is being practically ignored.

During the year 7 Discretionary Grants and only 2 Standard Grants were approved, the total sum paid in grants being £1967. 3. 2d.

Since 1955, when the first Grant was approved, the total sum paid out has been £10,533. This somewhat disappointing figure is due, not to refusals by the local authority, but solely to lack of applications.

### LETTING OF COUNCIL HOUSES

This part of the Council's administration is carried out by the Health Department.

During the year, a total of 146 families were rehoused (the figure for 1960 was 256). The extent of our ability to rehouse families depends largely on the size of our building programme, as the number of casual vacancies in our existing pool of houses remains fairly constant.

The position of our application list at the end of the year was as follows:-

Applicants at present in lodgings	287
Applicants from outside the district	51
Applicants presently tenants of old houses	232
Applicants for single bedroom flats	94
Applicants of all kinds already approved and awaiting accommodation	73
	737

A year previously the list contained 838 names, and the reduction suggests that we are making headway and that the present need for municipal housing is lessening.

Two significant figures in the preceding table are worth drawing attention to, however. Firstly, the comparatively high proportion of applicants who are already tenants of old houses is significant. As stated earlier in this report, people no longer wish to live in sub-standard or obsolete dwellings.

The second figure to which attention is drawn is the 94 applicants for single bedroom flats. If this figure is a little lower than a year ago, it is because the applicants are dying before their turn comes for rehousing. There are sufficient applicants already approved to take up all the accommodation we are likely to get in the next 12 months. When we will be able to deal with the 94 applicants above-mentioned, I cannot guess.

It is still essential to stress that our greatest need is for single bedroom accommodation and that the small numbers of such accommodation presently being allocated is quite inadequate.

Small bungalows for elderly people are the ideal. With two storey flats, the upper storey is wasted as far as our urgent cases are concerned. They all need ground floor accommodation. And sites in the centre of our population units must be chosen. Elderly people cannot walk long distances up and down hills to shops.

The above points may appear obvious when read, but they are not so obvious when new housing is being planned. The need is still so great and is not being catered for, that once again it is necessary to raise the matter and ask for proper consideration to be given to the housing of the elderly sections of the community.

### FOOD INSPECTION AND HYGIENE

### Slaughterhouses

Five private slaughterhouses were licenced for the year under review, but during the year, two of these ceased slaughtering. These were the two premises which we envisaged in our Slaughterhouse Report could not be brought up to the standard required by the Regulations.

Our Slaughterhouse Report has been accepted by the Ministry and the appointed day has been proposed for 1st January, 1963. A great deal of work remains to be done in the three slaughterhouses affected.

It has been observed that the number of slaughtermen's licences applied for has been diminishing over the last few years. For 1961, only 10 licences were issued - the lowest ever. This is a change for the good. Instead of the old practice of everyone about the premises being licenced and taking a hand now and again in the killing, such work is now tending to be concentrated in the hands of a few specialists.

The following table shows the animals inspected during the year and the number affected with various conditions resulting in the rejection of the whole or parts of carcases or edible offals. All animals slaughtered during the year were inspected.

### Tuberculosis

	Number Inspected	Whole carcases condemned	Part Condemned	Percentage affected
Cattle (including calves)	1007	Nil	Nil	Nil
Pigs	3253	1	52	1.6
Sheep	7628	Nil	Nil	Nil

### Other Diseases

	Number Inspected	Whole carcases condemned	Part <u>Condemned</u>	Percentage affected
Cattle (including calves)	1007	Nil	163	16.2
Pigs	3253	3	88	2.8
Sheep	7628	7	611	8.0

The comparatively high percentage of cattle and sheep affected with other diseases is due to the high incidence of liver infections which fortunately do not otherwise affect the carcase. They are important, however, in view of the popularity of this organ as an item of diet and its supposedly health giving properties. I should doubt nevertheless if many meat inspectors even eat any liver.

The total weight of meat and offals rejected as unfit for consumption was 1 ton 19 cwts 2 qrs 5 lbs. This figure is not high, considering the number of animals seen, and is due to the high quality of the meat which passed through our private slaughterhouses.

Only one slaughterhouse still finds it necessary to slaughter at the most irregular and oddest of hours, evenings, weekends and holidays included. This makes the job exasperating as well as difficult.

### Food Premises

Periodical inspections of all food premises in the district continued throughout the year. While no serious infringements of the Regulations were found, various matters were from time to time brought to the attention of those concerned. In all, 132 informal notices were thus served, the matters being attended to without recourse to further action, beyond a few reminders and warnings.

The following foodstuffs in shops were certified as unfit for habitation and destroyed.

60 tins of fruit

41 " " meat

20 " " tomatoes

11 " peas

9 " " fish

4 " " rice

3 " " vegetables

3 " " milk

41bs of Cheese.

During the year a number of food hygiene swabs were taken at food premises and submitted for examination to the Public Health Laboratory Stafford. Some of the results were most illuminating.

From slaughterhouses and the shops attached thereto, 25 swabs were taken from working surfaces, utensils, equipment and so forth. These were submitted to a plate count, and the results varied from under 100 colonies up to 8,000,000, some of the higher samples also showing E. coli of faecal origin.

From canteens, 101 swabs were taken from working surfaces, utensils, crockery and cutlery. The results were better here, ranging from under 100 colonies to 320,000 with no faecal coli.

In the case of bakeries, from where 32 swabs were taken, the results ranged from under 100 colonies to 15,000, again with no faecal coli.

A few shops were also tested and 8 swabs submitted with results from under 100 colonies to 973 and no faecal coli.

The results from the slaughterhouses were rather alarming and the methods of working were gone into with great care. I am not optimistic enough to suggest that any lasting improvement has resulted. Eternal vigilance in this section of our work will be necessary.

During the year 35 samples of ice cream, all pre-packed, were taken and submitted for examination by the methylene blue test. The results were extremely good, 33 of the samples being placed in Grade I, and 2 in Grade II. There were no Grades III or IV.

In addition, 24 lollies were submitted for examination, and of these only one failed the test.

The shops in the district which sell open food were given special attention, and samples were taken from every one of these where any quantity of such food was sold.

The following foodstuffs were sampled and submitted for bacteriological examination, 66 samples in all.

Boiled ham Bacon Cooked beef Cheese Cakes Fish Luncheon meat Roast pork Tongue Meat pies Corned beef Pressed meat Pressed beef		12 12 3 9 7 6 4 1 1 4 3 3 1
		66

In no cases were any organisms of the Salmonella or Shigella groups found.

Three samples of water from one of our schools were submitted for analysis. Complaints had been received about the quality of the supply, but the analysis disclosed nothing wrong with the water.

### FOOD AND DRUGS, ACT, 1955.

### List of Samples taken during the year 1961

### General Foods

Number of samples taken Number of samples genuine Number of samples adulterated

### CLASSIFICATION

Pork Sausage containing perservative (8 samples)

Peeled Plum Tomatoes

Instant Coffee (2 samples)

Tea (3 samples)

Instant Chicken Stuffing

Smoked Ham and Beef

Peanut Butter

Mild Ale

Vitamin Tablets High Protein Cereal

Catarrh Pastilles

Pure Danish Cream Chocolate Flavoured Coated

Sandwich

Broad Beans

Soft Herring Roes

Loganberries

Prunes

Self Digestive Food

Cough Mixture

Medicine for Coughs

Glucose Drink Flu Mixture

Cod Liver oil B.P.

Dairy Ice Cream

Real Salmon Spread with Butter

Beef Sausage containing preservative

Luncheon Meat (2 samples)

Instant Bread Sauce with Onion

Chopped Ham

Full Cream Evaporated Milk

Tomato Catsup Twin Ice Cream

Lemon Pie Filling

Slimming Biscuits

Christmas Plum Pudding Herbal Cough Medicine

Baked Beans in Tomato Sauce

with Pork

Steak and Kidney Pie

Corned Beef

Raspberry Ripple Sweets Pure Almond Marzipan

Christmas Pudding

Fresh Dairy Whipped Cream

Cheesy Twistes Ground Ginger

Vanilla Flavour Custard Power

Danish Pork Luncheon Meat

Strawberry Jam

Milk

Vintage Marmalade

Lime Jelly Marmalade Barbecue Spaghetti with

Frankfurters

Danish Cocktail Sausage in Brine

Vitamin Drops Gravy Browning

Butter Rum Truffles

Chewing Gum

Pork Pie

Halibut Liver Oil Capsules B.P.

Tablets for Headaches Unsweetened Full Cream Evaporated Milk

White Clover Honey

Instant Coffee and Chicory

### PARTICULARS OF ADULTERATED SAMPLE

### 46 C/P - Gravy Browning - Formal Sample

Consisted of more than one ingredient but label did not bear list of such ingredients.

Label to be amended.

### Milk

During the year 40 samples of milk were taken and submitted to tests. Two of these samples were submitted to a biological test for tuberculosis and both proved negative. The other 38 samples were submitted and passed a number of tests as follows -

24 samples passed the phosphatase test

8 " " turbidity test

30 " methylene blue test

•

### ATMOSPHERIC POLLUTION

### Industrial Premises

Fortunately, from the atmospheric pollution point of view, we have few industrial premises in the district.

The trouble from the hospital chimney, mentioned in previous reports, has now been cleared up. A new boiler plant has been installed which is working satisfactorily without any cause for complaint.

The two brickworks in the district, however, still give us cause for concern. Both premises are scheduled and are under the control of the Alkali Inspectorate. We can only hope that early improvement will be shown here.

### Smoke Observations

As reported previously, we have been asked by the Warren Spring Laboratory of the Department of Scientific and Industrial Research to carry out smoke observations, and during the year 3 stations were set up, one each in Sedgley, Upper Gornal and Lower Gornal.

Readings of smoke pollution and sulphur dioxide content are taken daily and the results sent to the laboratory.

A synopsis of the results obtained from the three testing stations is set out below.

For each month, the highest pollution figure obtained on any day during that month is given in the first column, the lowest in the second column and the average daily figure for the month is given in the third.

Tests are made for solid pollutants (smoke) and for sulphur dioxide and the figures given denote the degree of pollution given as microgrammes per cubic metre of the air tested.

The figures do not at first glance appear to follow any definite pattern, but closer study will show a definite rise in smoke pollution in November and December, especially the latter month. We had several foggy days in December with very high results. The general picture is of gradually increasing pollution from July to December as household fires come more into use.

As regards sulphur dioxide pollution, the results are limited to the 3 months when readings were taken, but again the picture is the same - increasing pollution as winter comes on.

The station at Straits House shows the least overall pollution. This is only to be expected as it is situated in a smoke control area which came into operation on the 1st October, 1961.

The reason why the figures are not more consistently what we hope they will be, is doubtless due to weather conditions. Winds can easily blow pollution from one part of the district to another. The gradual extension of smoke control areas will tend to prevent pollution arising anywhere.

### TABLE OF SMOKE CONCENTRATIONS

3. HELLTH DEPARTMENT OFFICE LIO 0 18	2. STRAITS HOUSE, LOWER GORNAL	1. JEWS LINE DEPOT	H	TESTING ST.TION JULY
100	260	120		
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160	140	90	Д	IES
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220	170	190	H	001
10	0	20	Н	OCTOBER
54	49	57		100
260	196	243		OM
<u> </u>	J	30	H	NOVEMBER
13 100 711	95	111		
711	11811	554	耳	DE
32	98	29	H	DECEMBER
213	139	157		μ

# TABLE OF SULPHUR DIOXIDE CONCENTRATIONS

3. HEALTH DEPARTMENT OFFICE	2. STRAITS HOUSE, LOWER GORNAL	1. JEWS LINE DEPOT		TESTING STATION		
	the state of the s	l	H		1	
	The second secon			YULY	on the state of th	
	1	1			TV.	
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31	0	7	Н	DECEMBER		
262	121	113		Ŗ		

### Smoke Control Areas

A. .

- No.1. 512 houses in an area of 60 acres. Confirmed 1959. In operation since 1960. We have had no trouble here and everything is working satisfactorily.
- No.2. A rapidly expanding area of about 1,000 houses in an area of 425 acres. Confirmed 1960. Came into operation October 1961. Once again there has been no trouble of any kind.
- Nos. 3,4,5,6

  Four small areas taken together, containing 423 houses in an area of 31 acres. These were confirmed in 1961 and will come into operation in July 1962.
- No.7. Another rapidly expanding area of 668 houses in an area of 604 acres. This area has not yet been confirmed.
- No.8. We have commenced our preliminary work in this area.

At our present rate of progress, we should have no difficulty in completely covering the Urban District well within the 15 years envisaged in our first report to the Ministry. Whether or not we can keep up our present rate, depends on many factors, and I should not like to be too optimistic.

### PUBLIC CLEANSING

The district is still expanding rapidly, the number of houses having increased from 8,716 in 1960 to 8,946. One extra man was engaged during the year to bring one of the collection rounds up to strength. The number of men in the department - 25 - is exactly what it was in 1945. The number of refuse collectors has increased, of course, but there has been a corresponding reduction in the number employed in refuse disposal, salvage, emptying of chemical closets and privies.

Throughout the year we continued to maintain the weekly collection service. Even in the notoriously difficult period after Christmas, the regular service was carried on without falling into arrears.

Some modifications to the bin bonus scheme were made in the year under review. Owing to the reduction to 42 hours per week of the basic time, the target figure was reduced from 80 bins per day, or 400 per week, to 60 on one day, or 380 per week. At the same time the bin bonus rate was increased from the 2d. summer rate to  $2\frac{1}{2}d$ . per bin all the year round,

Refuse disposal continued to be carried out at our Humphrey Street tip throughout the year without any trouble. There were no fires and no infestations by insect pests. Dosing the tip with insecticide at the least sign of insects, as well as using plenty of covering material, prevented any nuisance. A few rats were dealt with as a routine measure as soon as they were discovered.

This tip is approaching the end of its life, but the Council have purchased a very suitable piece of ground at Lower Gornal which will serve the district for many years to come.

Apart from some scrap metals, the only material salvaged is waste paper from shops. The picking of soiled paper from the tip is not desirable. We made no efforts to increase the quantity of salvaged paper as we would have had difficulty in disposing of it. As it was, we were restricted in our sales by a limit placed on us by the paper merchants.

Altogether, 83 tons 9 cwts of paper were sold during the year, for which we received £658. Another £16. 2. 6d. was received from the sale of scrap metal.

The smooth working of the Cleansing section is in large measures due to the excellent work of the employees and their willingness to carry out the work of absent colleagues. The following figures show that although we had an establishment of 25 men, in fact we were very much under strength throughout the year.

Total	hours	lost	through	sickness	• • •	• • •	2528
11	11	11	11	holidays		• • •	2931
11	"(i.e.		leaving la <b>c</b> ed for	under est and not b r some tim		ment	4461 
			Gı	rand Total			9920

This is equivalent to an average throughout the year of  $4\frac{1}{2}$  short. The actual work of the department was, therefore, carried out by a force of  $20\frac{1}{2}$  men.

### MISCELLANEOUS MATTERS

### Inspections.

Although the number of inspections carried out during the year mean very little, as an inspection can take 2 minutes or 2 hours, I give below for record purposes some figures relating to our work in all fields.

The total number of inspections made by the 3 public health inspectors was 6935. As a result 217 notices were served, requesting repairs, improvements or action of some kind.

A further 632 re-inspections were carried out to premises on which notices had been served, and 204 were marked off as complied. Some of the work complied with referred to notices served towards the end of 1960, and there were still a number of 1961 notices uncomplied with at the end of the year.

### Caravans

We were in serious trouble throughout the year with regard to a most unsatisfactory caravan site in the district. Prolonged and troublesome litigation regarding this site is still proceeding.

Fortunately we were rather freer than usual from unauthorised camping on odd sites by itinerant caravan dwellers. The site abovementioned, which caters for this type of caravan dweller, apparently supplied a need, although with a serious loss of amenity and hygiene.

### Infectious Disease and Food Poisoning

No outbreak of infectious disease or food poisoning, which might have involved the public health inspectors in a good deal of work, occurred during the year. We sincerely hope that our efforts in food hygiene will continue to prevent any such occurrence.

### Rodent Control

The occasional complaint of rats is still received from time to time and dealt with immediately. No major infestations arose, and possible reservoirs or breedings grounds were dealt with as routine measures.

### Insect Pests

Once again we had a good year. The major trouble like bugs and cockroaches appear to be things of the past. A few houses with ants seem to give rise to complaint every year. On investigation we found nothing serious and it is always a problem to decide whether or not it is worth ripping up floors and taking out fireplaces for the sake of a few ants which soon disappear. The public is becoming very insect-conscious.

### Factories

An endeavour is made to visit every factory at least once each year. All the larger places are visited several times, especially if there is a canteen, but some of the small places hardly seem worth the time spent, in view of the many other calls we feel are more important.

H.M. Factory Inspector occasionally draws our attention to certain matters, but we like to anticipate such reports if we can.

A summary of the factory inspections made is given as an annex to this report.

### Noise

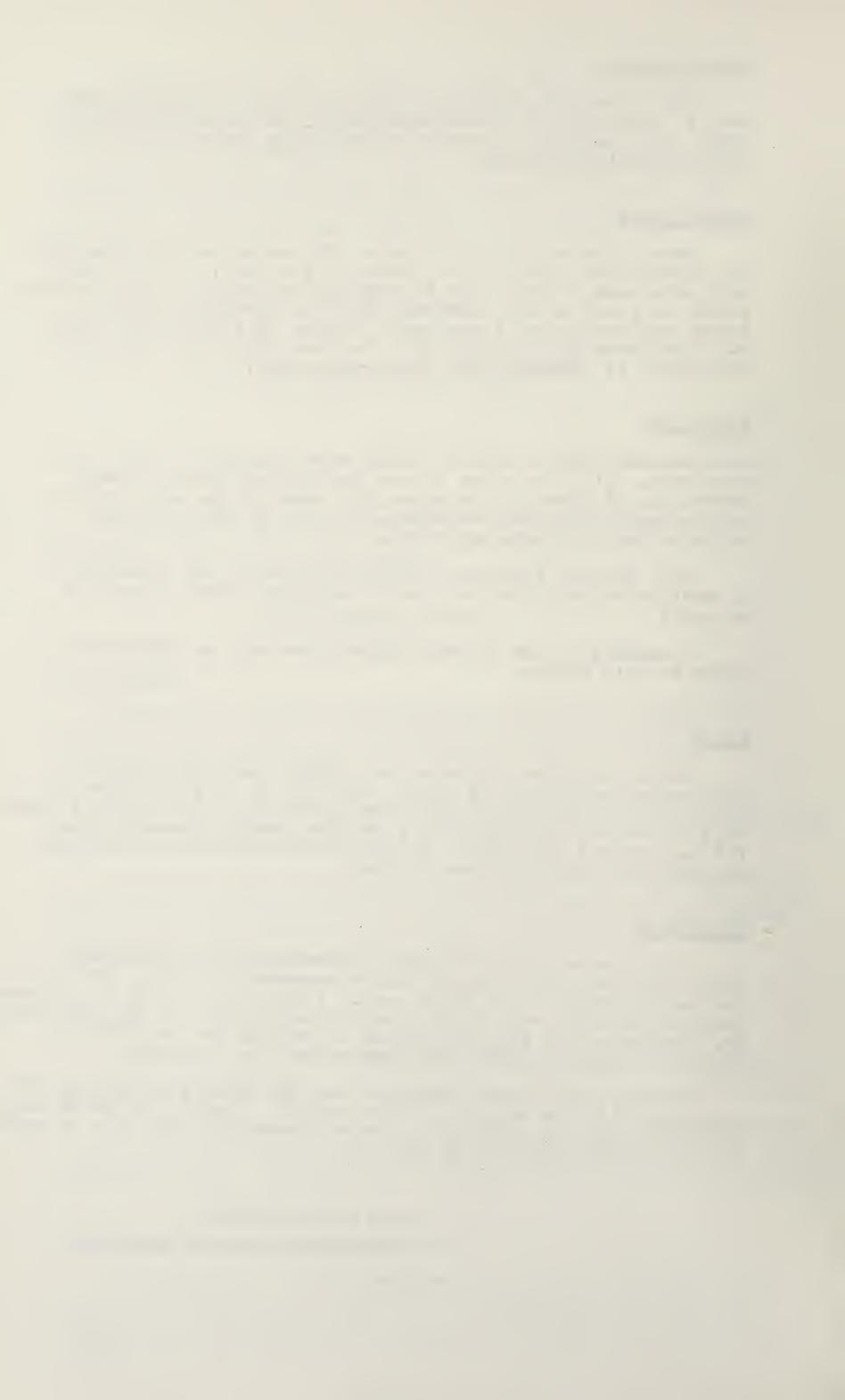
Since the Noise Abatement Act, 1960, came into force we have had no complaints of noise, nor have we felt justified in acting in any particular case. As mentioned earlier in this report, this is not an industrial area, and the general atmosphere is fairly peaceful and quiet. We are ready, however, to deal with the question should the need arise.

### Conclusion

I wish once again to thank all members of the staff for their help and loyal co-operation throughout the year. Much of the work reported on is their work. I should also like to express publicly that the very cordial relationship which we all have with Dr. Mackenzie, our Medical Officer of Health, is the principal reason for such success as the department has achieved.

Finally, the Health Committee and the Council have given the department all the support we have needed. Their's is the ultimate responsibility and we have endeavoured throughout the year to work to the standard expected of us.

DAVID J.W. ROBERTSON, Chief Public Health Inspector.



### FACTORIES ACTS, 1937 to 1959

### 1. - INSPECTIONS for purposes of provision as to health.

Anthonormus we we do not	Monomente committed in the sage of the sage of the part of the sage of the sage in the sage of the sag	Number	D	umber of	
Premises		on Register	Inspections	Written notices	Occupiers prosecuted
(i)	Factories in which Sections 1,2,3,4, and 6 are enforced	16	19		<b>s</b> ens
(ii)	Factories not included in (i) in which Section 7 is enforced	74	83	-	
(iii)	Other Premises in which Section 7 is enforced (excluding outworkers' premises)	38	38		
	Total	128	140	-	

### 2. - Cases in which DEFECTS were found.

	Numbe		es in which ere fo <b>u</b> nd	h defects	Number of cases in
Particulars	Found	Remedied	To H.M.	erred By H.M. Inspector	which prosecutions were instituted
Want of cleanliness (S.1)	5	5	***	حات	
Overcrowding (S.2)					_
Unreasonable temperature (S.3)	-		-	-	game
Inadequate ventilation(S.4)		-	-	-	_
Ineffective drainage of floors (S.6)	-	_	Quantity (	-	are)
Sanitary Conveniences (S.7) (a) Insufficient	1			_	_
(b) Unsuitable or defective (c) Not separate for	4	4	1	1	
sexes		purb.	-	-	-
Other offences against the Act (not including offences relating to Outwork)	6	6			
Total	16	15	1	1	

